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FACSIMILE TRANSMISSION

DATE:

September 23, 2004

To:

Name	Fax No.	PHONE NO.
Group Art Unit 3761	703 872-9306	
Attn: Karin M. Reichle		

FROM:

Billie Jean Smith

PHONE:

(414) 347-4770

SENT BY:

Susan Pomeranz

EXTENSION: 5244

LOCATION: 30W

RE:

Application No. 10/657,432

NUMBER OF PAGES, INCLUDI	NG COVER:	10	,	
CLIENT-MATTER NUMBER:	015005-9426		SENDER'S ACCOUNT NUMBER	537
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Preliminary Amendment attached.		

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THE INFORMATION CONTAINED IN THIS FACSIMILE IS INTENDED ONLY FOR THE PERSONAL AND CONFIDENTIAL USE OF THE DESIGNATED RECIPIENTS NAMED ABOVE. THIS MESSAGE MAY BE AN ATTORNEY-CLIENT COMMUNICATION, OR MAY BE PROPRIETARY CONFIDENTIAL INFORMATION OF A CLIENT, AND AS SUCH IS PRIVILEGED AND CONFIDENTIAL. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT OR ANY AGENT RESPONSIBLE FOR DELIVERING IT TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT YOU HAVE RECEIVED THIS DOCUMENT IN ERROR, AND THAT ANY REVIEW, DISSEMINATION, DISTRIBUTION OR COPYING OF THIS MESSAGE IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US BY MAIL. THANK YOU.

I, Susan Pomeranz, hereby certify that this correspondence is being

facsimile transmitted to the Commissioner for Patents, P.O. Box

1450, Alexandria, VA 22313-1450, on the date of my signature.

Date of Signature

. 09/23/2004 11:10 FAX 4142770656 MBF MILWAUKEE 2 JIN THE UNITED STATES PATENT AND TRADEMAKE OFFICE Group Art Unit 3761

In re

Patent Application of

Barry G. Anderson, et al.

Application No. 10/657,432

Confirmation No.: 9042

Filed: September 8, 2003

Examiner: Reichle, Karin M.

"MEDICAL SUCTION APPARATUS AND METHODS FOR DRAINING SAME"

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Preliminary Amendment in the above-identified application.

The fee has been calculated as shown below.

		CLAIN	AS AS AMENDED			
(1)	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	40	MINUS	20	20	X \$18	360.00
INDEP. CLAIMS	7	MINUS	5	2	X \$86	172.00
		•	TOTAL ADDITIONAL FEE FOR THIS AMENDMENTO			532.00

In the event Applicant has overlooked the need to request an extension of time, please consider this a request for the same.

Charge Deposit Account No. 13-3080 for the fees associated with this communication. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Billie Jean Smith Reg. No. 36,940

Michael Best & Friedrich LLP 100 East Wisconsin Avenue Milwaukee, Wisconsin 53202-4108 (414) 271-6560 File No. 015005-9426-02 T:\clienta\015005\9426\A0948404.1 Appl. No.

10/657,432

Confirmation No.

: 9042

Applicant

: Barry G. Anderson, et al.

Filed

: September 8, 2003

Title

: MEDICAL SUCTION

APPARATUS AND METHODS

FOR DRAINING SAME

TC/A.U.

: 3761

Examiner

Reichle, Karin M.

Docket No.

: 015005-9426-02

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date of my signature.

SEP 2 3 2004

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 8 of this paper.